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					Examiner	Name		Sabiha Naim Qazi			
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EXAMINER SIGNATURE: /Sabiha Qazi/ DATE CONSIDERED: /Sabiha Qazi/	_489
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^{*} Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.